

Bureau of Health Care Quality & Compliance

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: NVS436AGC	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____	(X3) DATE SURVEY COMPLETED 07/28/2009
NAME OF PROVIDER OR SUPPLIER QUALITY GUEST HOME 2		STREET ADDRESS, CITY, STATE, ZIP CODE 3980 PLACITA AVENUE LAS VEGAS, NV 89121		
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Y 000	<p>Initial Comments</p> <p>The findings and conclusions of any investigation by the Health Division shall not be construed as prohibiting any criminal or civil investigations, actions or other claims for relief that may be available to any party under applicable federal, state, or local laws.</p> <p>This Statement of Deficiencies was generated as a result of an annual State Licensure survey conducted at your facility on 7/28/09. This State Licensure survey was conducted by the authority of NRS 449.150, Powers of the Health Division.</p> <p>The facility was licensed for five Residential Facility for Group beds for elderly and disabled person and/or persons with mental illness Category I residents. The census at the time of the survey was four. Four resident files were reviewed and three employee files were reviewed. three discharged resident files were reviewed. The facility received a grade of D.</p> <p>The following deficiencies were identified:</p>	Y 000		
Y 072 SS=F	<p>449.196(3) Qualications of Caregiver-Med Training</p> <p>NAC 449.196 3. If a caregiver assists a resident of a residential facility in the administration of any medication, including, without limitation, an over-the-counter medication or dietary supplement, the caregiver must: (a) Receive, in addition to the training required pursuant to NRS 449.037, at least 3 hours of training in the management of medication. The caregiver must receive the training at least every 3 years and provide the residential facility with satisfactory evidence of the content of the training</p>	Y 072		

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TITLE

(X6) DATE

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

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Y 103	Continued From page 2 (Employee #2) for the protection of all residents. Employee #2 did not have evidence of a two-step TB test, or an annual TB test for this year. This was a repeat deficiency from the 9/11/08 State Licensure survey. Severity: 2 Scope: 3	Y 103		
Y 151 SS=C	449.204(1)(b) Insurance NAC 449.204 1. A residential facility shall: (b) Maintain a contract of insurance for protection against liability to third persons in amounts appropriate for the protection of residents, employees, volunteers and visitors to the facility. This Regulation is not met as evidenced by: Based on interview and observation on 7/28/09, the facility failed to maintain a contract of insurance for the facility on site. Interview with Employee #1 revealed the insurance policy was not kept at the facility. This was a repeat deficiency from the 9/11/08 State Licensure survey. Severity: 1 Scope: 3	Y 151		
Y 175 SS=F	449.209(4)(b) Health and Sanitation-Hazards NAC 449.209 4. To the extent practicable, the premises of the facility must be kept free from:	Y 175		

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Y 175	Continued From page 3 (b) Hazards, including obstacles that impede the free movement of residents within and outside the facility. This Regulation is not met as evidenced by: Based on observation on 7/28/09, the facility failed to ensure the facility was free of tripping hazards. The flooring changed from linoleum in the family room, hallway and bedrooms to tile in the kitchen and two bathrooms. The facility failed to ensure a transition piece was located between the linoleum and the tile leaving approximately a one inch height difference. Severity: 2 Scope: 3	Y 175			
Y 178 SS=F	449.209(5) Health and Sanitation-Maintain Int/Ext NAC 449.209 5. The administrator of a residential facility shall ensure that the premises are clean and that the interior, exterior and landscaping of the facility are well maintained. This Regulation is not met as evidenced by: Based on observation on 7/28/09, the facility failed to ensure the interior premises was well maintained. Linoleum in the kitchen, living room, hallway and bedrooms was pulling away from the wall, and portions were missing. The toilet seat cover in Bathroom #1 was missing, there was mold in the shower in Bathroom #1 and the sliding glass door used for the shower was hard to open. The shower in Bathroom #2 had paint chipping away.	Y 178			

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Y 178	Continued From page 4 Severity: 2 Scope: 3	Y 178		
Y 179 SS=E	449.209(6) Health and Sanitation-Screens NAC 449.209 6. All windows that are capable of being opened in the facility and all doors that are left open to provide ventilation for the facility must be screened to prevent the entry of insects. This Regulation is not met as evidenced by: Based on observation on 7/28/09, the facility failed to provide screens doors on all of the windows to prevent the entry of insects. (Three windows were missing screens. The window in the family room on the same wall as the front door, the widow in the kitchen that opened into the laundry room, and the widow in the caregiver's bedroom next to the tall gray filing cabinet.) Severity: 2 Scope: 3	Y 179		
Y 223 SS=F	449.213(3) Laundry-Linen - Equipment, Venting NAC 449.213 3. The laundry room in a residential facility must be situated in an area which is separate from an area where food is stored, prepared or served. The laundry must be adequate in size for the needs of the facility and maintained in a sanitary manner. The laundry room must contain at least one washer and at least one dryer. All the equipment must be kept in good repair. All	Y 223		

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Y 223	Continued From page 5 dryers must be ventilated to outside the building. If a washer or dryer is located outside the residential facility, the washer or dryer must be in a room or enclosure. This Regulation is not met as evidenced by: Based on interview and observation on 7/28/09, the facility failed to ensure 1 of 1 dryers was working properly and vented to the outside of the building. The surveyor turned on the dryer and it made a noise at which time Employee #2 stated the dryer was not working properly. Severity: 2 Scope: 3	Y 223		
Y 251 SS=F	449.217(2) Storage of Food-Perishable foods refrigerated NAC 449.217 2. Perishable foods must be refrigerated at a temperature of 40 degrees Fahrenheit or less. Frozen foods must be kept at a temperature of 0 degrees or less. This Regulation is not met as evidenced by: Based on observation on 7/28/09, the facility failed to ensure refrigerated foods were kept at a temperature of 40 degrees or less, and frozen foods were kept at a temperature of 0 degrees or less. Severity: 2 Scope: 3	Y 251		

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Y 300 SS=H	<p>449.218(1) Bedrooms - Size Requirements</p> <p>NAC 449.218</p> <p>1. A bedroom in a residential facility that is shared by two or three residents must have at least 60 square feet of floor space for each resident who resides in the bedroom. A resident may not share a bedroom with more than two other residents. A bedroom that is occupied by only one resident must have at least 80 square feet of space.</p> <p>This Regulation is not met as evidenced by: Based on interview and observation on 7/28/09, the facility failed to ensure 2 of 4 residents had at least 60 square feet of floor space (Resident #2 and #3).</p> <p>Findings include:</p> <p>Two residents were in Bedroom #1. The surveyor measured the room and it was 113 square feet, which does not meet the minimum requirement of 60 square feet of floor space for each resident who resides in the bedroom. In addition, the arrangement of the two beds was a hazard as one bed completely blocked the door into the bathroom, and the other bed blocked most of the opening to the closet. The surveyor interviewed Employee #1 regarding the size of the room and she stated she knew the room was not big enough for two residents.</p> <p>Severity: 3 Scope: 2</p>	Y 300		

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Y 859	Continued From page 7	Y 859			
Y 859 SS=E	<p>449.274(5) Periodic Physical examination of a resident</p> <p>NAC 449.274 5. Before admission and each year after admission, or more frequently if there is a significant change in the physical condition of a resident, the facility shall obtain the results of a general physical examination of the resident by his physician. The resident must be cared for pursuant to any instructions provided by the resident's physician.</p> <p>This Regulation is not met as evidenced by: Based on record review on 7/28/09, the facility failed to ensure that 3 of 7 residents received an annual physical (Resident #1, #2 and #5). Resident #1 was admitted 5/1/09, the only physical in the file was dated 4/3/07. Resident #2 was admitted 7/2/08, the only physical in the file was dated 10/14/08. Resident #5 was admitted 12/5/08, no evidence of a physical was in the file.</p> <p>This was a repeat deficiency from the 9/11/08 State Licensure survey.</p> <p>Severity: 2 Scope: 2</p>	Y 859			
Y 878 SS=I	<p>449.2742(6)(a)(1) Medication / Change order</p> <p>NAC 449.2742 6. Except as otherwise provided in this subsection, a medication prescribed by a</p>	Y 878			

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Y 878	<p>Continued From page 8</p> <p>physician must be administered as prescribed by the physician. If a physician orders a change in the amount or times medication is to be administered to a resident:</p> <p>(a) The caregiver responsible for assisting in the administration of the medication shall:</p> <p>(1) Comply with the order.</p> <p>This Regulation is not met as evidenced by: Based on record review and interview on 7/28/09, the facility failed to ensure that 3 of 4 residents received medications as prescribed (Resident #1, #2 and #3).</p> <p>This was a repeat deficiency from the 9/11/08 State Licensure survey.</p> <p>Findings include:</p> <p>Resident #2 - Clonazepam .5 MG two tablets by mouth in the morning. The resident did not receive the medication from 7/1/09 through 7/7/09. Resident #2 was able to tell the surveyor she was prescribed Clonazepam for anxiety, and the facility ran out of the medication during the beginning of July. Resident #2 stated the facility tried to contact the pharmacy regarding the medication, but did not receive a response. Resident #2 went to the doctor 7/7/09 for a TB test, and while in the clinic asked the doctor about her prescription for Clonazepam. The doctor failed to submit the prescription to the pharmacy. Resident #2 states during the first week of July she was anxious and on two occasions unable to leave the facility due to anxiety.</p>	Y 878		

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Y 878	Continued From page 9 Resident #1 - Amlodipine Besylate 10 MG, one tablet in the morning. The resident missed 8 doses from 7/1/09 through 7/8/09. - Metformin HCL 500 MG, one tablet two times a day. The resident missed 18 doses from 7/1/09 through 7/9/09. - Calcium Citrate + Vitamin D. Not on MED review 6/5/09, no prescription on site. Resident #3 -Levothyroxine 125 MCG, one tablet every day. The resident missed 15 doses from 7/1/09 through 7/15/09. Severity: 3 Scope: 3	Y 878		
Y 883 SS=I	449.2742(7) Medication / Resident Refusal NAC 449.2742 7. If a resident refuses, or otherwise misses, and administration of medication, a physician must be notified within 12 hours after the dose is refused or missed. This Regulation is not met as evidenced by: Based on observation on 7/28/09, the facility failed to ensure a physician was notified for 3 of 3 residents who missed medications. Severity: 3 Scope: 3	Y 883		

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Y 885	Continued From page 10	Y 885		
Y 885 SS=D	<p>449.2742(9) Medication / Destruction</p> <p>NAC 449.2742</p> <p>9. If the medication of a resident is discontinued, the expiration date of the medication of a resident has passed, or a resident who has been discharged from the facility does not claim the medication, an employee of a residential facility shall destroy the medication, by an acceptable method of destruction, in the presence of a witness and note the destruction of the medication in the record maintained pursuant to NAC 449.2744. Flushing contents of vials, bottles or other containers into a toilet shall be deemed to be an acceptable method of destruction of medication.</p> <p>This Regulation is not met as evidenced by: Based on observation and interview on 7/28/09, the facility failed to ensure the medications for 1 of 3 discharged residents were destroyed after the resident left the facility (Resident #7).</p> <p>Severity: 2 Scope: 2</p>	Y 885		
Y 895 SS=C	<p>449.2744(1)(b)(1) Medication / MAR</p> <p>NAC 449.2744</p> <p>1. The administrator of a residential facility that provides assistance to residents in the administration of medication shall maintain: (b) A record of the medication administered to each resident. The record must include:</p>	Y 895		

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Y 944	<p>Continued From page 13</p> <p>the facility did not provide proper documentation regarding a resident who had had been discharged.</p> <p>This was a repeat deficiency from the 9/11/08 State Licensure survey.</p> <p>Severity: 1 Scope: 1</p>	Y 944			

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